

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>04/24/02</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>M.M.</i>	<i>71628</i>	<i>7-27-00</i>
RESPONSE FORMALITY REVIEW			<i>6-20-00</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	9/12/03
2	✓	✓	6/19/04
3	✓	✓	11/18/04
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	6/18/04
52	✓	✓	
53	✓	✓	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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